MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51				1		/
2							52				1		/
3							53				1		/
4							54				1		/
5							55				1		/
6							56				1		/
7							57				1		/
8							58				1		/
9							59				1		/
10							60				1		/
11							61				1		/
12							62				1		/
13							63				1		/
14							64				1		/
15							65				1		/
16							66				1		/
17							67				1		/
18							68				1		/
19							69				1		/
20							70				1		
21							71				1		
22							72				1		
23							73				1		
24			1				74				6		2
25				1		/	75				1		
26				1		/	76				6		6
27				1			77				20		19
28				1		/	78						
29				1		/	79						
30				1		/	80						
31				1		/	81						
32				1		/	82						
33				1		/	83						
34				1		/	84						
35				1		/	85						
36				1		/	86						
37				1		/	87						
38				1		/	88						
39				1		/	89						
40				1		/	90						
41				1		/	91						
42				1		/	92						
43				1		/	93						
44				1		/	94						
45				1		/	95						
46				1		/	96						
47				1			97						
48				1		/	98						
49				1		/	99						
50				1		/	100						
TOTAL IND.	1						TOTAL IND.			1		1	
TOTAL DEP.	22						TOTAL DEP.			82		70	
TOTAL CLAIMS	23						TOTAL CLAIMS			83		71	